

72. SEQUENCE OF EVENTS/MOST HARMFUL EVENT:

Sequence of Events							
First		Second		Third		Fourth	
0	0	0	0	0	0	0	0
1	1	1	1	1	1	1	1
2	2	2	2	2	2	2	2
3	3	3	3	3	3	3	3
4	4	4	4	4	4	4	4
5		5		5		5	
6		6		6		6	
7		7		7		7	
8		8		8		8	
9		9		9		9	
Most Harmful: (M)		(M)		(M)		(M)	

A. SEQUENCE OF EVENTS:

Non-Collision (01 thru 14)

- | | |
|----------------------------|---------------------------------|
| 01 Loss of control | 08 Fire/explosion |
| 02 Cross centerline/median | 09 Immersion |
| 03 Ran off road-left | 10 Jackknife |
| 04 Ran off road-right | 11 Downhill runaway |
| 05 Re-enter roadway | 12 Cargo loss/shift |
| 06 Overturn | 13 Individual fell from vehicle |
| 07 Separation of units | 14 Other non-collision |

Collision With *Non-Fixed Objects* (15 thru 21)

- | | |
|--------------------------------|----------------------------|
| 15 Pedestrian | 19 Railroad train/engineer |
| 16 Pedalcycle | 20 Animal |
| 17 Motor vehicle in transport* | 21 Other non-fixed object |
| 18 Parked motor vehicle** | |

* In transport means a motor vehicle in motion, or on a roadway illegally parked.

** Motor vehicle parked legally.

Collision With *Fixed Objects* (22 thru 45)

- | | |
|------------------------------|--------------------------------------|
| 22 Bridge/pier/abutment | 34 Curb |
| 23 Bridge parapet end | 35 Ditch |
| 24 Bridge rail | 36 Embankment |
| 25 Guardrail face | 37 Fence |
| 26 Guardrail end | 38 Mailbox |
| 27 Median barrier | 39 Tree |
| 28 Highway traffic sign post | 40 Rail crossing signal |
| 29 Highway signal post | 41 Building |
| 30 Luminary/light support | 42 Traffic island |
| 31 Utility pole | 43 Fire hydrant |
| 32 Other pole | 44 Impact attenuator (crash cushion) |
| 33 Culvert | 45 Other fixed object |

B. MOST HARMFUL:

Most Harmful is the incident which caused the most injury to a human being. If no injury, event which caused the most property damage.

73. **CRASH DIAGRAM AND REMARKS:** (Required for FataIs)

Use this section to diagram the event and add any necessary remarks to explain what occurred. **The Fatality Analysis Reporting System (FARS) requires this information.** See sample diagram in Appendix A, page 68.

[illegible]

74. INVESTIGATED AT SCENE:

Investigated
at Scene

Mark the "Y" bubble if the crash was investigated at the scene. Otherwise, mark the "N" bubble.

75. REPORTED DATE/TIME:

Reported Date/Time

Enter the date (month, day, and year) and military time that this crash **was reported to your department.**

76. PHOTOS BY:

Photos By

Enter the photographer's initials, name, badge number or other identifying data.

77. INVESTIGATOR NAME(S)/BADGE NUMBER(S): (Please print)

Investigator Name(s) & Badge # (Print Only)

Please print the name(s) and badge number(s) of the investigating officer(s).

TRUCK/BUS INFORMATION

FOR ADDITIONAL INFORMATION IN FILLING OUT THE TRUCK PORTION, ASSISTANCE MAY BE AVAILABLE BY CONTACTING THE MSP, MOTOR CARRIER DIVISION AT: (517) 336-6195

Definition of Truck/Bus:

1. Any truck or truck tractor that has at least two axles and six tires on the power unit, including pickup trucks.
2. Any vehicle that displays a hazardous material placard, **automobiles and vans included**.
3. Any bus designed to transport 16 or more passengers, including the driver.
4. Any yellow and black school bus.

78. UNIT NUMBER:

Unit No.	①	②	③	④	⑤	⑥	⑦	⑧	⑨
----------	---	---	---	---	---	---	---	---	---

Mark the unit number that corresponds to the unit number you assigned the truck or bus in Section 30, page 30.

A truck or bus may be reported in any unit area on the UD-10. If the crash involves more than one truck or bus, they must have different unit numbers. However, **only one truck or bus may be reported per form.**

79. CARRIER NAME:

Carrier Name

List **one** of the following in the "Carrier Name" section:

1. The carrier is the person, agency, or corporation that controls the movement of the vehicle for transport of the load. The carrier's name shall be obtained from one of the following in this order of preference: **(Note: The carrier name can be different than the actual owner of the truck.)**
 - a. Shipping papers and bills of lading (Figure 5, page 62)
 - b. Side of the power unit (permanently or temporarily displayed) (Figure 6, page 62)
 - c. Driver's daily log (Figure 7, page 62)
 - d. From the driver

2. For government owned and operated vehicles, either federal, state or local agencies, list the government entity as displayed on the vehicle, i.e., Grand Ledge Public Schools, Road Commission for Oakland County, U.S. Army, etc. If an address is given on the vehicle or the registration, list it in the address section.
3. For privately owned non-commercial vehicles, such as a six-wheel pickup or small truck, list the owner as it is displayed on the vehicle registration.

NOTE: It is very important that the carrier name be listed exactly as it appears on the documents used to identify that carrier. Do not abbreviate the name in any way except for the abbreviations which appear on the documents.

80. CARRIER ADDRESS:

Address		
City	State	Zip

Enter the address of the carrier, company, agency or individual listed in "Carrier Name" section.

NOTE: Be sure to list the zip code. List all nine-digit extended zip codes when they are available.

81. CARRIER SOURCE: (Mark only one)

Carrier Source	
<input type="radio"/> Papers	<input type="radio"/> Log Book
<input type="radio"/> Vehicle	<input type="radio"/> Driver

Mark the source used to obtain the carrier name. (The four sources are discussed in "Carrier Name" Section 79, page 54).

82. ICCMC/USDOT/MPSC:

:	ICCMC
:	USDOT
:	MPSC

There are three types of carrier numbers that may be found on trucks and buses. Carrier licensing numbers are found on the power unit. All Interstate Commerce Commission Motor Carrier (ICCMC), United States Department of Transportation (USDOT) and Michigan Public Service Commission (MPSC) numbers shall be listed on the report, if such information is available.

NOTE: Private intrastate carriers (operating in Michigan only) are not required to display a carrier number, but they must display the company name and city location on the vehicle. See Figure 6 on page 62.

83. INTERSTATE/INTRASTATE:

<input type="radio"/> Interstate	<input type="radio"/> Intra (MI Only)
----------------------------------	---------------------------------------

If the power unit shows an Interstate Commerce Commission Motor Carrier (ICCMC) or United States Department of Transportation (USDOT) number, mark the "Interstate" bubble.

NOTE: For all privately owned (non-commercial) and state and local government owned vehicles, mark "Intrastate (Michigan only)."

84. GROSS VEHICLE WEIGHT RATING (GVWR):

GVWR

Enter the "GVWR" for the vehicle. This information can be taken from the manufacturer's identification plate or sticker which is normally located in the driver's door area or within the cab.

If you cannot find the "GVWR" plate or sticker on the power unit, enter the weight listed on the registration. If no weight appears on the registration, leave this box blank.

85. DRIVER'S CDL TYPE:

Driver's CDL Type	
<input type="radio"/> A	<input type="radio"/> H
<input type="radio"/> B	<input type="radio"/> N
<input type="radio"/> C	<input type="radio"/> P
	<input type="radio"/> T
<input type="radio"/> None	<input type="radio"/> X

For commercial drivers, mark all code letters as displayed in the "C.D.L. Type" box on the driver license. **(See page 65 for examples)**

GROUP
"A" "B" "C" with

ENDORSEMENTS
"H" "N" "P" "T" "X"

NOTE: For further information regarding CDL requirements for commercial vehicle operation, see the "Vehicle Type" section in these instructions (Section 89, page 58).

86. MEDICAL CARD:

Medical Card	
<input type="radio"/> Y	<input type="radio"/> N

Drivers of trucks with a gross vehicle weight greater than 10,001 pounds (4,537 kilograms) **actual weight, or GVWR**, or interstate commercial buses **designed** for carrying 16 or more passengers including the driver, or any vehicle requiring placards for hazardous materials, **must** be medically qualified and carry a medical examiners certificate (Appendix A, Figure 12, page 65). Some intrastate drivers who have a long continuous service with a company may have qualified for the grandfather medical waiver and will carry a certificate stating so. A very limited number of drivers may carry a medical waiver certificate for a physical disability.

Fill in the "Yes" bubble if the driver has a medical card, grandfather card, or medical waiver certificate.

87. CDL RESTRICTIONS:

CDL Restrictions	
<input type="radio"/> 28	<input type="radio"/> 35
<input type="radio"/> 29	<input type="radio"/> 36
<input type="radio"/> 30	

These restrictions are for Michigan licensed drivers only. A sticker with all restrictions is placed on the back of the license and applicable restrictions are circled in red. Mark all those CDL restrictions in the "C.D.L. Restrictions" box that are circled in red on the back of the driver license. **(See page 65 for examples)**

- 28 CDL Not Valid for Vehicle with Air Brakes
- 29 CDL P Endorsement Valid in Group B or C Vehicle Only
- 30 CDL P Endorsement Valid in Group C Vehicle Only
- 35 No Single Vehicle/Power Unit Over 26K GVWR
- 36 No GVWR Over 26K if Towed Vehicle Over 10K GVWR

88. CDL EXEMPT:

CDL Exempt	
<input type="radio"/> Farm	
<input type="radio"/> Other	

If the driver is operating a commercial vehicle which requires a CDL but has no CDL, it **must** be determined if that driver is exempt from the CDL. That determination is made by the investigating officer and is based on the operation being performed. Exemptions are not listed on the driver license.

Exemptions are listed in Section 257.302 and 257.312e, subsections (4), (5), (6), (7) and (8) of the Michigan Vehicle Code (revised 1995). If the driver is "farm exempt," mark "Farm."

Exemptions:

- (1) Farm, if the driver is "farm exempt".

The "Other" three exemptions to the CDL requirements are:

- (2) Qualified military drivers in military vehicles.
- (3) Qualified firefighters operating authorized emergency vehicles.
- (4) Persons operating a motor home or a vehicle used exclusively to transport personal possessions or family members for non-business purposes. If one of these exemptions applies, mark "Other."

89. VEHICLE TYPE:

Vehicle Type	
<input type="radio"/> AA	<input type="radio"/> BB
<input type="radio"/> AH	<input type="radio"/> BH
<input type="radio"/> AN	<input type="radio"/> BN
<input type="radio"/> AP	<input type="radio"/> BP
<input type="radio"/> AT	<input type="radio"/> BX
<input type="radio"/> AX	<input type="radio"/> CH
<input type="radio"/> AY	<input type="radio"/> CP
<input type="radio"/> AZ	<input type="radio"/> CX
<input type="radio"/> AL	<input type="radio"/> Other

Group A: Any vehicle that is towing a vehicle or trailer that has a gross vehicle weight rating (GVWR) over 10,000 lbs.

Vehicle Two-position Codes		Operator CDL Endorsement Required	
AA =	Group A vehicle	A	
AH =	Group A vehicle, Hazardous	A	H
AN =	Group A vehicle, Tank	A	N
AP =	Group A vehicle, Passenger	A	P
AT =	Group A vehicle, Double/Triple	A	T
AX =	Group A vehicle, Tank & Hazardous	A	X
AY =	Group A vehicle, Tank & Double/Triple	A	NT
AZ =	Group A vehicle, Hazardous, Double/Triple	A	HT
AL =	Group A vehicle, Hazardous Tank, Double/Triple	A	TX

Group B: Any single vehicle (including buses) with a GVWR of 26,001 lbs. and greater, or a combination of vehicles with a combined GVWR over 26,000 lbs. when towing a trailer that has a GVWR of 10,000 lbs. or less.

Vehicle Two-position Codes		Operator CDL Endorsement Required	
BB =	Group B vehicle	B	
BH =	Group B vehicle, Hazardous	B	H
BN =	Group B vehicle, Tank	B	N
BP =	Group B vehicle, Passenger	B	P
BX =	Group B vehicle, Tank & Hazardous	B	X

Group C: Any single vehicle with a GVWR of less than 26,001 lbs. or a combination of vehicles having a combined GVWR under 26,001 lbs. when the vehicle is required to display placards for hazardous material or designed to carry 16 passengers (including driver). Group "C" is also any vehicle carrying 15 or fewer people (including driver) transporting children to or from school and home on a regular basis for compensation.

Vehicle Two-position Codes		Operator CDL Endorsement Required	
CH =	Group C vehicle, Hazardous	C	H
CP =	Group C vehicle, Passenger	C	P
CX =	Group C vehicle, Tank & Hazardous	C	X

90. TYPE AND AXLES PER UNIT:

Type & Axles Per Unit			
First	Second	Third	Fourth

Enter the total number of axles per unit. Starting with the left box, first enter the power unit and then each trailer or towed unit.

If the truck is a truck tractor (a vehicle designed only to tow other units and has no cargo body), **place a "T" in front of the number** of axles for the power unit.

If the trailer is a semi-trailer (designed so that part of the trailer load is carried on the towing unit), **place an "S" in front of the number** of axles in the appropriate box.

Example: A dump truck pulling a utility trailer with a bulldozer would be listed as **3-S2** (The "S2" designates a two-axle semi-trailer which places part of the trailer weight on the towing unit.)

Example: A truck tractor towing a van semi-trailer would be **T3-S2** (The "T3" designates a three-axle truck tractor and the "S2" designates a two-axle semi-trailer.)

Example: A truck tractor towing a gravel semi-trailer/trailer combination (doubles) would be listed as **T3-S3-5** (The "S3" designates a three-axle semi-trailer, and the "5" designates a five-axle full trailer which does not place any of the load on the towing unit except for the tongue weight.)

91. CARGO BODY TYPE:

Cargo Body Type	①	②	③	④	⑤	⑥	⑦	⑧
-----------------	---	---	---	---	---	---	---	---

Indicate body type of the truck being reported and select one of the following:

- | | |
|-----------------------|---------------------|
| 1. Van (enclosed box) | 5. Concrete mixer |
| 2. Cargo tank | 6. Auto transporter |
| 3. Flatbed/platform | 7. Garbage/refuse |
| 4. Dump | 8. Other/unknown |

Example: A dump truck towing a lowboy trailer with a dozer would be listed as a "Dump truck." However, a truck-tractor towing a lowboy semi-trailer with a dozer will be listed as a "Flatbed/platform" because the truck tractor has no cargo body.

"Van (enclosed box)" is meant to be used with the normal enclosed cargo box whether it be a semi-trailer or a straight truck body. This category was not meant for use with a bus.

"Cargo tank" means a completely enclosed tank type body designed to transport liquid, gaseous and flowable solid material (powder, granular, etc.).

"Auto transporter (semi-trailer)" is only used for semi-trailer auto transport vehicles. Straight trucks transporting vehicles will be listed under "Flatbed/platform," as appropriate.

There are several types of vehicles which best fit in the "Other" category. These include such vehicles as tow trucks, utility and line trucks, pole trailers and special use vehicles not otherwise listed. Buses, pickups and "bobtail" truck tractors (without a trailer) will also be listed under "Other."

92. HAZARDOUS MATERIAL:

Hazardous Material				
Placard	<input type="radio"/>	Y	<input type="radio"/>	N
Cargo Spill	<input type="radio"/>	Y	<input type="radio"/>	N

PLACARD:

If the vehicle had "hazardous material" placards displayed, fill in the bubble for "Yes;" if not, indicate "No." This does not include "Drive Safely" or other similarly worded placards.

SPILL:

Were hazardous materials spilled/released from the vehicle during the crash? Mark "Yes" or "No" as appropriate. Materials that spill but are contained within the vehicle and not released to the outside will not be considered as spilled/released for this report.

NOTE: Only the cargo is to be considered for this question. This does not include fuel from the vehicle fuel tanks or other hazardous material spilled from a fixed containment which was struck by any of the vehicles during the crash.

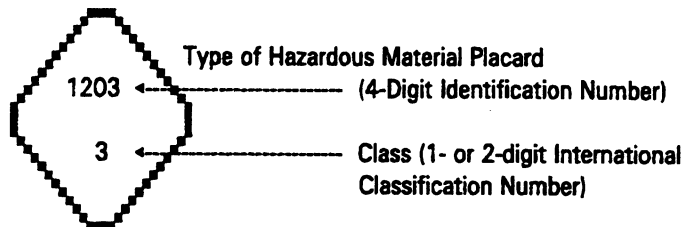
93. HAZARDOUS MATERIAL PLACARD IDENTIFICATION NUMBER:

ID #

If a Hazardous Material Placard is displayed, mark the four-digit identification number that appears in the center of the diamond-shaped placard (or orange panel, whichever is applicable). If more than one placard appears on the panel, list only one.

Class

HAZARDOUS MATERIAL PLACARD



96. LITHO CODING: DO NOT CROSS OUT ANY BUBBLES IN THIS AREA, EVEN WHEN SUBMITTING A CORRECTED COPY, REPLACE OR DELETE.


Do Not Write or Mark in This Area

Do Not Use

61

SAMPLE SHIPPING DOCUMENT

Figure 5



Northwest Food Co., Inc.
SPECIALISTS IN FRESHWATER FISH & SEAFOOD
IMPORTERS • DISTRIBUTORS
12301 CONANT • DETROIT, MICH. 48212 • (313) 368-2500

REMIT TO:
NORTHWEST FOOD CO.
DETROIT, MI 48212

INVOICE NO.
65483

517-322-9955
POUR HOUSE
SOLD TO 6951 LANSING RD.
TO CHARLOTTE MI 48813

PAGE 1

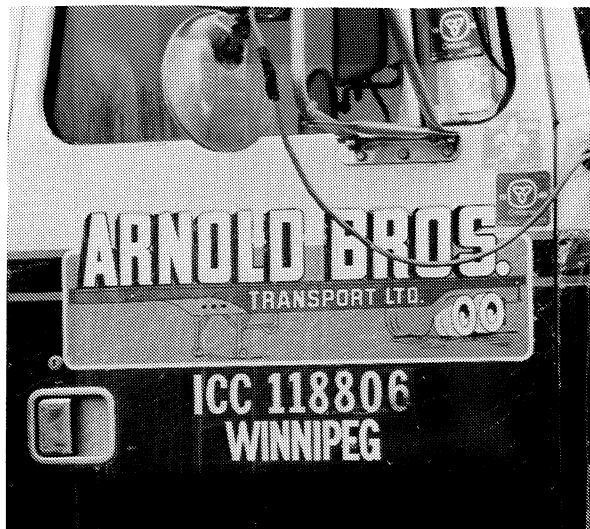
SHIP TO

INVOICE DATE		SALESMAN		TERMS	CUSTOMER NO.	ROUTE
5/10/94		BRIAN TIERNEY		COD	CUST-08246	LANS

ORDER NUMBER	ITEM NO	PACK	DESCRIPTION	QUANTITY	PRICE	AMOUNT
45546	000371		SCROD SKIN-ON BOSTON	30.00	3.75	112.50
						TOTAL DUE
						112.50

SPECIAL INSTRUCTIONS

NO CLAIMS FOR DEDUCTIONS ALLOWED UNLESS MADE IMMEDIATELY ON RECEIPT OF GOODS DO NOT DISPOSE OF DISPUTED STOCK WITHOUT OUR APPROVAL
 ALL INVOICES NOT PAID BY DUE DATE ARE SUBJECT TO A SERVICE CHARGE OF 1 1/2% (18% ANNUAL)
 CUSTOMER COPY



Carrier name
Figure 6

DRIVER'S DAILY LOG																				RECAP																																																																																																																																																																																													
Date: _____ Month: _____ Day: _____ Year: _____ Total mileage today: _____ I certify these entries are true and correct. Total miles driving today: _____ Name of Center or Centers: _____ Name of conductor: _____																		Mileage today: _____ Subtotal: _____ Add Mileage from Last Day: _____ Mileage this Trip: _____																																																																																																																																																																																															
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2">TIME</th> <th colspan="11">Main Office Address</th> <th colspan="11">Home Terminal Address</th> <th rowspan="2">TOTAL HOURS</th> </tr> <tr> <th>1</th><th>2</th><th>3</th><th>4</th><th>5</th><th>6</th><th>7</th><th>8</th><th>9</th><th>10</th><th>11</th> <th>1</th><th>2</th><th>3</th><th>4</th><th>5</th><th>6</th><th>7</th><th>8</th><th>9</th><th>10</th><th>11</th> </tr> </thead> <tbody> <tr> <td>OFF DUTY</td> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> <td></td> </tr> <tr> <td>SLEEPER</td> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> <td></td> </tr> <tr> <td>BERTH</td> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> <td></td> </tr> <tr> <td>DRIVING</td> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> <td></td> </tr> <tr> <td>ON DUTY</td> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> <td></td> </tr> <tr> <td>NOT DRIVING</td> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> <td></td> </tr> </tbody> </table>																		TIME	Main Office Address											Home Terminal Address											TOTAL HOURS	1	2	3	4	5	6	7	8	9	10	11	1	2	3	4	5	6	7	8	9	10	11	OFF DUTY																								SLEEPER																								BERTH																								DRIVING																								ON DUTY																								NOT DRIVING																									
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REMARKS: _____ Check the time and enter name of place you reported and where released from work and when and where each change of duty occurred. Explain excess hours. FROM: _____ TO: _____ Starting point or place _____ Destination or turn around point or place _____																																																																																																																																																																																																																	

Driver's Daily Log
Figure 7



Figure 8

**Interstate Commerce
Commission Motor Carrier
(ICCMC) Number for
Regulated
Interstate Carrier**

Figure 9

**Michigan Public Service
Commission (MPSC)
Carrier Number
for Regulated
Intrastate Carrier**

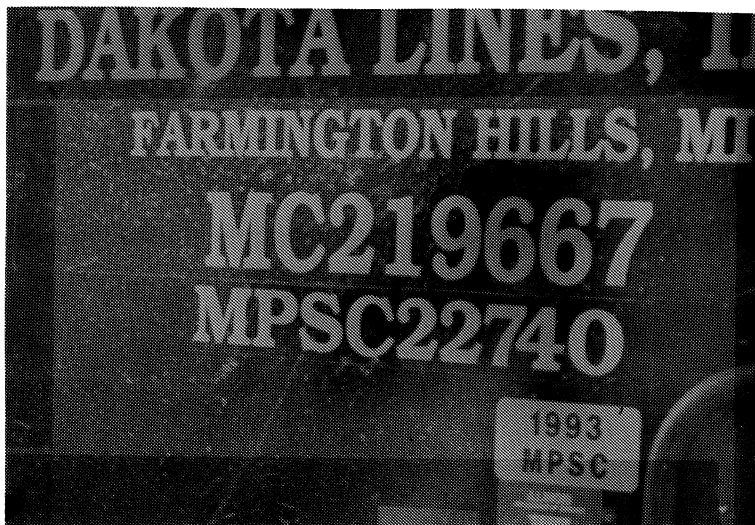


Figure 10

**United States Department
of Transportation (USDOT)
Carrier Number for Private
Interstate Carrier**



MICHIGAN REGISTRATION

CANDICE S. MILLER
Secretary of State

Plate: 601AAA Expires: 06/01/99

ORIGINAL REGISTRATION

91 CHEVROLET 2 DOOR

Vehicle No.: 1GCCS19R3M123444

Fee Cat. or Wt.: 000010

A 000 123 111 400

County: IONIA

JOHN PAUL ANYONE

1234 ANY STREET

SOMEPLACE MI 48000

License Fee: 57.00

031098 L3 J069 099 0001 57.00

TR-1L

Registration
Figure 11

MEDICAL EXAMINER'S CERTIFICATE

I certify that I have examined

(Driver's name (print))
in accordance with the Federal Motor Carrier Safety Regulations (49 CFR §391.41 through §391.49) and with knowledge of his/her duties, I find him/her qualified under the regulations. Expiration date of this certificate: _____
Qualified only when wearing: ☐ Corrective lenses ☐ Hearing aid.
☐ Medically unqualified unless accompanied by a waiver.
☐ Medically unqualified unless driving within an exempt intracity zone.
☐ Qualified by operation of 49 CFR 391.64.
A complete examination form for this person is on file in my office.

()
Area Code & Telephone Number

(Medical Examiner (Print Name and Title))

(Signature of Medical Examiner)

(Title) (License or Certification No.) (State in Which Licensed)

(Signature of driver)

(Address of driver)
Michigan Trucking Association®1997 Form C0750
To reorder call (517) 321-1951

Medical Examiner's Certification
Figure 12

MICHIGAN APPORTIONED REGISTRATION CAB CARD

Owner (Lessor)				
Unit Number	Year	Make	Type	Fuel
A2	1998	FORD	TR	L
Vehicle Identification Number			Gross Vehicle Weight	
1FU1RFPY88R1891343			36000	
Unladen Weight	County Code	Tab Number		
12000	33			
MI Wgt. Fee	Misc. Fee	MI Total Fee	Date Registered	
13.11	.00	13.11	02/03/98	
Account Number				
Operator (Lessee) 99999-03-000				
*COVERS TRUCKING				
7064 CROWNER DRIVE				
LANSING MI 48909-				
1998-104				

STATE OF MICHIGAN — DEPARTMENT OF STATE

Authority granted under Act No. 124 (PA 1960)
No jurisdictions are to be listed after the row of asterisks or card is invalid. This card must be carried in the vehicle to which it is issued or be subject to confiscation. Copies are not valid.

The vehicle described has been proportionally registered between the State of Michigan and the jurisdictions shown below.

Plate Number					
AB 016341	AL 036000	AR 036000	AZ 036000	BA 036000	BB 036000
BC 016341	CA 036000	CD 036000	CE 036000	CF 036000	CG 036000
DE 036000	DF 036000	FL 036000	GA 036000	HB 036000	HC 036000
IA 036000	ID 036000	IL 036000	IN 036000	MA 036000	MD 036000
ME 036000	MI 036000	MO 036000	NC 036000	ND 036000	NE 036000
NH 036000	NJ 036000	NM 036000	NY 036000	OH 036000	OK 036000
OR 036000	PA 036000	RI 036000	SC 036000	SD 036000	SE 036000
TX 036000	UT 036000	VA 036000	VT 036000	WA 036000	WI 036000
WV 036000	WY 036000	XX 036000	YY 036000	ZZ 036000	AA 036000
BB 036000	CC 036000	DD 036000	EE 036000	FF 036000	GG 036000
HH 036000	II 036000	JJ 036000	KK 036000	LL 036000	MM 036000
NN 036000	OO 036000	PP 036000	QQ 036000	RR 036000	SS 036000
TT 036000	UU 036000	VV 036000	WW 036000	XX 036000	YY 036000
ZZ 036000	AA 036000	BB 036000	CC 036000	DD 036000	EE 036000

EXPIRES 12/31/1998

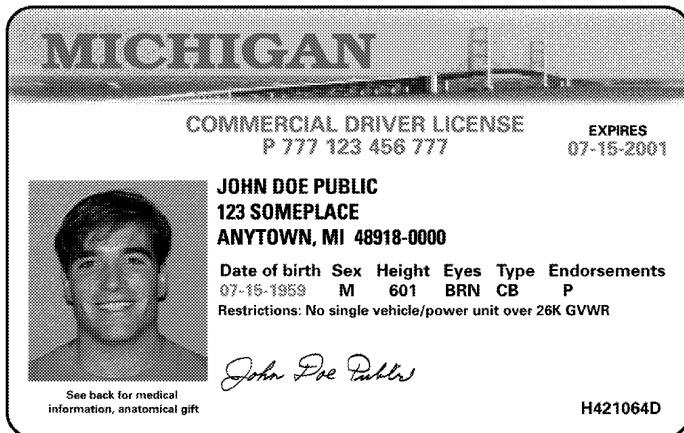
1998

US WCTS IN LBS. CAN WCTS IN KGS

IRP-2 (8/89)

Apportioned Registration CAB Card
Figure 13

LICENSE AND "CDL" TYPES



License Types:

O = Operator
C = Chauffeur
PO = Probationary Operator
MO = Moped Operator

CDL Restriction Sticker:
(Placed on back of license with CDL restrictions circled)

CDL RESTRICTION(S) CIRCLED

28 CDL Not Valid for Veh with Air Brakes
29 CDL P Endorsement Valid in Group B or C Veh Only
30 CDL P Endorsement Valid in Group C Veh only
35 No Single Veh/Power Unit Over 26K GVWR
36 No GCWR Over 26K if Towed Veh Over 10K GVWR

GROUP VEHICLE DESIGNATORS:

Group "A" Designation:

- A vehicle towing another vehicle or trailer with a G.V.W.R. of OVER 10,000 lbs. Regardless of the G.V.W.R. of the towing vehicle.
- Group "A" designation allows you to operate both group "B" and "C" vehicles as well.

Group "B" Designation:

- A single vehicle having a G.V.W.R. over 26,001 lbs.
- A combination of vehicles having a combined G.V.W.R. over 26,000 lbs. When the towed vehicle is LESS than 10,000 lbs.
- Group "B" designation allows you to operate group "C" vehicles as well.

Group "C" Designation:

- Vehicles designed to carry 16 or more passengers, including the driver.
- Small vehicles (including passenger and pickups) when carrying hazardous materials in amounts that would require placarding of the vehicle.

ENDORSEMENTS:

Air Brakes - If the vehicle is equipped with air brakes, you will need to take the skills and knowledge parts of the CDL test that refers to air brakes. There is no actual endorsement added to the license; however, if you DO NOT pass that portion of the test, the license will be printed with 'MAY NOT OPERATE A VEHICLE EQUIPPED WITH AIR BRAKES.'

"T" - Double and Triple trailers (for Group "A" only). Triple trailers are not permitted in the state of Michigan, but are permitted in certain other jurisdictions.

"N" - To haul liquids or liquefied gases in bulk in any tank (permanent OR portable) rated at 1,000 gal. or more. Is needed for both Group "A" and "B."

"H" - To carry any hazardous materials in amounts requiring placarding (includes small trucks, pickup trucks and passenger vehicles). Is needed for ALL Groups.

"X" - Tanker(s) carrying hazardous materials (may take the place of "N" and "H").

"P" - Passenger endorsement. If the vehicle is DESIGNED to carry 16 or more people including the driver. Needed for Groups "A," "B," and "C." ("A" is needed when a Bus is pulling a trailer over 10,000 lbs. GVWR)

"F" - Farm Equipment. A person operating a combination of vehicles having a G.V.W.R. of 26,000 lbs. or more on the power unit (truck or road tractor), is required to have the "F" endorsement if the following conditions are met: (1) Controlled by and operated by the farmer or a member of his family or an employee of the farmer; (2) Vehicle is used to transport agricultural products, farm machinery, farm supplies, or a combination of these items, to or from a farm; (3) The vehicle is *not used* in the operation of a common, limited common, or contract motor carrier, or (4) the vehicle is operated within 150 air miles of the farm.

SAMPLE OF NEW MICHIGAN DRIVER LICENSE/ID FORMATS

MICHIGAN

OPERATOR LICENSE
P 999 123 456 789

EXPIRES
09-10-2002

JOHN DOE PUBLIC
123 SOMEPLACE
ANYTOWN, MI 48918-0000

Date of birth Sex Height Eyes Type Endorsements
09-10-1948 M 601 BRN O CY

Restrictions: Corrective Lens

John Doe Public

See back for medical information, anatomical gift

H3012647

MICHIGAN

Under 21
Until 10-15-1999

OPERATOR LICENSE
D 123 456 789 999

EXPIRES
10-15-1999

ANNE CARR DRIVER
123 SOMEPLACE
ANYTOWN, MI 48918-0000

Date of birth Sex Height Eyes Type Endorsements
10-15-1978 F 504 BRN O NONE

Restrictions: NONE

Anne Carr Driver

See back for medical information, anatomical gift

F3012637

MICHIGAN

CHAUFFEUR LICENSE
D 888 123 456 777

EXPIRES
05-20-2002

ANNE CARR DRIVER
123 SOMEPLACE
ANYTOWN, MI 48918-0000

Date of birth Sex Height Eyes Type Endorsements
05-20-1972 F 510 BLU C NONE

Restrictions: NONE

Anne Carr Driver

See back for medical information, anatomical gift

J3033057

MICHIGAN

COMMERCIAL DRIVER LICENSE
P 777 123 456 777

EXPIRES
07-15-2001

JOHN DOE PUBLIC
123 SOMEPLACE
ANYTOWN, MI 48918-0000

Date of birth Sex Height Eyes Type Endorsements
07-15-1959 M 601 BRN CB P

Restrictions: No single vehicle/power unit over 26K GVWR

John Doe Public

See back for medical information, anatomical gift

H421064D

MICHIGAN

Under 21
Until 11-02-2002

GRADUATED DRIVER LICENSE
P 999 777 888 222

EXPIRES
11-02-2002

JOHN DOE PUBLIC
123 SOMEPLACE
ANYTOWN, MI 48918-0000

Date of birth Sex Height Eyes Type Endorsements
11-02-1981 M 601 BRN O2 NONE

Restrictions: Corrective Lens

John Doe Public

See back for medical information, anatomical gift

E2012747

MICHIGAN

Under 21
Until 01-28-1999

MOPED LICENSE
D 888 111 222 333

EXPIRES
01-28-1999

ANNE CARR DRIVER
123 SOMEPLACE
ANYTOWN, MI 48918-0000

Date of birth Sex Height Eyes Type Endorsements
01-28-1978 F 502 BLU M NONE

Restrictions: NONE

Anne Carr Driver

See back for medical information, anatomical gift

F1281247

MICHIGAN

IDENTIFICATION CARD
P 777 123 456 7

EXPIRES
12-18-2002

JOHN DOE PUBLIC
123 SOMEPLACE
ANYTOWN, MI 48918-0000


Date of birth Sex Height Eyes Weight
12-18-1948 M 601 BRN 180

John Doe Public

See back for medical information, anatomical gift

J1323097

Information contained in bar code and magnetic stripe is limited to date of birth, license/ID number and expiration date.



I would like to make an anatomical gift effective on my death:

☐ all organs ☐ all tissues (bone, eyes, other)

☐ specific organs: _____

Signature: _____

Witness: _____

Emergency contact: _____

Telephone: () _____

Medical Alert

USE BALL POINT PEN ONLY

This space available for change of address label

SAMPLE OF MICHIGAN DRIVER LICENSE/ID FORMATS

DRIVER LICENSE		MICHIGAN		BUCKLE UP	
A 660 355 248 379		14065095		02	
MARY ANTOINE UNDER 21					
		MICHIGAN IDENTIFICATION CARD 1 155 210 072 4 7027274 JOE SAMPLE UNDER 21 523 ANY STREET LANSING 48738 SEX: M DOB: 02 25 77 X <i>Joe Sample</i> IF YOU MOVE, YOU MUST CHANGE YOUR ADDRESS BY DRIVER LICENSE OFFICE			
					
DRIVER LICENSE		MICHIGAN		BUCKLE UP	
D 636 044 308 450		M35312		01	
ANGIE CAR DRIVER					
		SAMPLE LANSING 48517 DOB: 03 27 65 C A NT 5 3 CORN LENS <i>Angie Car Driver</i> NOT REPEATED SIGN CRADOCK E. MILLER Secretary of State			